.								_ (09	7	82	993	
Agency & State of the State of								A	Application or Docket Numb r				
	PATENT A	RD	1000 + 3 82-1										
		CLAIMS AS	FILED - (Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			20					ATE	FEE		RATE	FEE	
FOR			MUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	· 710.00	
TOTAL CHARGEABLE CLAIMS			2 0 minus 20=		· Ø		, ,	(\$ 9=		OR	X\$18=	-	
INDEPENDENT CLAIMS			3 minus 3 =		. 0			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM P			RES T			+139		135=		OR	+270=		
* If the difference in column 1 is			less than ze	oro, ente	r "0" in c	column 2		OTAL		OR	TOTAL		
CLAIMS AS AMÉ (Column 1)				D - PART II (Column 3)			s	MALL	ENTITY	OR	OTHER SMALL		
NTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
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							L	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE		
l		(Column 1)		(Colu	ımn 2)	(Column 3)		JII. FEE		•	, , , ,		
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a column 2, write "0" in column 3.

THIS SPACE is less than 20, enter "20."

. IniS SPACE is less than 3, enter "3."

* If the entry in column 1 is loss than the

"If the "Highest Number Provide. Ily Paic"
"If the "Highest Number Provide. Ily Paic
Ily Paic

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OR

+135=

ADDIT. FEE

.otal or Independent) is the highest number found in the appropriate box in column 1.

TOTAL

+270=

OR ADDIT, FEE